

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Irwin Kotovsky, Serge Cornelissen and Robert Cornelissen

Application No.: 10/612,169 Group No.: 2875

Filed: 07/01/2003 Examiner: Mark Tsidulko For: METHOD AND APPARATUS FOR LIGHTING WITH A CASSETTE

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is a small entity. A statement was already filed.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for two months:

12/03/2004 MBEYENE1 00000055 10612169

01 FC:2252

215.00 OP

Fee: \$215.00

CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a) and 1.10*

(When using Express Mail, the Express Mail label number is *mandatory*; Express Mail certification is optional.)

I hereby certify that, on the date shown below, this correspondence is being:

MAILING

X deposited with the United States Postal Service in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

37 C.F.R. § 1.8(a)

37 C.F.R. § 1.10*

X with sufficient postage as first class mail.

Mailing Label No. _____ (mandatory)

TRANSMISSION

☐ facsimile transmitted to the Patent and Trademark Office, (703)

Signature

Tracey L. Milka

(type or print name of person certifying)

^{*} Only the date of filing (§ 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under § 1.8 continues to be taken into account in determining timeliness. See § 1.703(f). Consider "Express Mail Post Office to Addressee" (§ 1.10) or facsimile transmission (§ 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)	(Col. 2) HIGHEST NO PREVIOUSLY PAID FOR		(Col. 3) PRESENT EXTRA			SMALL ENTITY					
	CLAIMS REMAINING AFTER AMENDMENT					RATE			ADDIT. FEE			
TOTAL	23	_	20	=	3	х	\$	9.00	=	\$	27.00	
INDEP.	5	_	3	=	2	х	\$	44.00	=	\$	88.00	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM+							\$	0.00	=	\$	0.00	
			_					TOTAL DIT. FEE		\$	115.00	

Total additional fee for claims required \$115.00

FEE PAYMENT

5. Attached is a check in the sum of \$330.00.

A duplicate of this paper is attached.

FEE DEFICIENCY

6. If an additional extension and/or fee is required, charge Account No. 19-0737.

If an additional fee for claims is required, charge Account No. 19-0737.

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